

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

ADDRESS (number and street)

PO BOX 24843

☐Check if different
than previously
reported. (ACC)

LOUISVILLE

KY

40224

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00015594

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☒January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2009

through

12

31

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mr. Ryan N. Pogue

Signature of Treasurer

Electronically Filed by Mr. Ryan N. Pogue

Date

01

31

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

Report Covering the Period:

From:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 7 | 0 | 1 | 2 | 0 | 0 | 9 |

To:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 1 | 2 | 3 | 1 | 2 | 0 | 0 | 9 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1 2009 | | -81.84 |
| (b) Cash on Hand at Beginning of Reporting Period | -12562.05 | |
| (c) Total Receipts (from Line 19) | 21047.30 | 54315.33 |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 8485.25 | 54233.49 |
| 7. Total Disbursements (from Line 31) | 28645.50 | 74393.74 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | -20160.25 | -20160.25 |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | 24090.77 | |

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

Report Covering the Period:

From:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | W | Y |
| 0 | 7 | 0 | 1 | 2 | 0 | 0 | 9 |

To:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | W | Y |
| 1 | 2 | 3 | 1 | 2 | 0 | 0 | 9 |

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A) | 16993.68 | 39753.68 |
| (ii) Unitemized | 3090.00 | 11003.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 20083.68 | 50756.68 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 925.00 | 3025.00 |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 21008.68 | 53781.68 |
| 12. Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees | 38.62 | 533.65 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3) | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfer (add 18(a) and 18(b)). | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 21047.30 | 54315.33 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 21047.30 | 54315.33 |

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

| II. DISBURSEMENTS | | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|----------|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | | |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4) | | | |
| (i) Federal Share..... | 0.00 | 0.00 | |
| (ii) Non-Federal Share..... | 0.00 | 21657.47 | |
| (b) Other Federal Operating Expenditures..... | 28645.50 | 28645.50 | |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤ | 28645.50 | 50302.97 | |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 | |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 | |
| 24. Independent Expenditure (use Schedule E) | 0.00 | 0.00 | |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00 | 0.00 | |
| 26. Loan Repayments Made..... | 0.00 | 0.00 | |
| 27. Loans Made..... | 0.00 | 0.00 | |
| 28. Refunds of Contributions To: | | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 | |
| (b) Political Party Committees | 0.00 | 0.00 | |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 | |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | 0.00 | 0.00 | |
| 29. Other Disbursements..... | 0.00 | 24090.77 | |
| 30. Federal Election Activity (2 U.S.C 431(20)) | | | |
| (a) Shared Federal Election Activity (from Schedule H6) | | | |
| (i) Federal Share | 0.00 | 0.00 | |
| (ii) "Levin" Share | 0.00 | 0.00 | |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 | |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 0.00 | 0.00 | |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. | 28645.50 | 74393.74 | |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 28645.50 | 52736.27 | |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) from Line 11(d), page 3) | 21008.68 | 53781.68 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 21008.68 | 53781.68 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 28645.50 | 28645.50 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 28645.50 | 28645.50 |

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mrs. Catherine Todd Bailey

Mailing Address 6410 Longview Lane

City

Louisville

State

KY

Zip Code

40222

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.9803

Amount of Each Receipt this Period

500.00

Personal Contribution

B.

Full Name (Last, First, Middle Initial)

Kevin Bratcher

Mailing Address 10215 Landwood Drive

City

Louisville

State

KY

Zip Code

40291

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.9869

Amount of Each Receipt this Period

100.00

Individual Contribution

C.

Full Name (Last, First, Middle Initial)

Scott Brinkman

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 5 / 2 0 0 9

Transaction ID: SA11AI.9841

Amount of Each Receipt this Period

250.00

Individual Contribution

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Gregory Brotzge

Mailing Address 1610 Parkridge Parkway

City

Louisville

State

KY

Zip Code

40214

FEC ID number of contributing
federal political committee.

C

Name of Employer
Brotzge Lobbying ServicesOccupation
Lobbyist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 5 / 2 0 0 9

Transaction ID: SA11AI.9828

Amount of Each Receipt this Period

500.00

Individual Contribution

B.

Full Name (Last, First, Middle Initial)

J. McCauley Brown

Mailing Address 5208 Avish Lane

City

Harrods Creek

State

KY

Zip Code

40027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Brown-FormanOccupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.9825

Amount of Each Receipt this Period

1000.00

Individual Contribution

C.

Full Name (Last, First, Middle Initial)

Ron Butt

Mailing Address 10906 Old Harrods Woods Cir.

City

Louisville

State

KY

Zip Code

40223

FEC ID number of contributing
federal political committee.

C

Name of Employer
PresidentOccupation
ARGI Financial Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.9998

Amount of Each Receipt this Period

1000.00

Individual Contribution

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 48

(check only one)

| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Ron Butt

Mailing Address 10906 Old Harrods Woods Cir.

City

Louisville

State

KY

Zip Code

40223

FEC ID number of contributing
federal political committee.

C

Name of Employer
President

Occupation

ARGI Financial Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | / | 2 | 7 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.9891

Amount of Each Receipt this Period

250.00

Individual Contribution

B.

Full Name (Last, First, Middle Initial)

Ellen B. Camentz

Mailing Address 6314 Shadow Wood Ct.

City

Prospect

State

KY

Zip Code

40059

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | / | 2 | 1 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.9895

Amount of Each Receipt this Period

250.00

Individual Contribution

C.

Full Name (Last, First, Middle Initial)

Ronald Catron

Mailing Address 312 McArthur Drive

City

Louisville

State

KY

Zip Code

40207

FEC ID number of contributing
federal political committee.

C

Name of Employer
LHI Lighting

Occupation

Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | / | 2 | 6 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.10016

Amount of Each Receipt this Period

10.00

Individual Contribution

SUBTOTAL of Receipts This Page (optional)

510.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Ronald Catron

Mailing Address 312 McArthur Drive

City

Louisville

State

KY

Zip Code

40207

FEC ID number of contributing
federal political committee.

C

Name of Employer
LHI Lighting

Occupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 6 / 2 0 0 9

Transaction ID: SA11AI.10017

Amount of Each Receipt this Period

10.00

Individual Contribution

B.

Full Name (Last, First, Middle Initial)

Ronald Catron

Mailing Address 312 McArthur Drive

City

Louisville

State

KY

Zip Code

40207

FEC ID number of contributing
federal political committee.

C

Name of Employer
LHI Lighting

Occupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 6 / 2 0 0 9

Transaction ID: SA11AI.10018

Amount of Each Receipt this Period

10.00

Individual Contribution

C.

Full Name (Last, First, Middle Initial)

Ronald Catron

Mailing Address 312 McArthur Drive

City

Louisville

State

KY

Zip Code

40207

FEC ID number of contributing
federal political committee.

C

Name of Employer
LHI Lighting

Occupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 9

Transaction ID: SA11AI.10019

Amount of Each Receipt this Period

10.00

Individual Contribution

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 10 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Ronald Catron

Mailing Address 312 McArthur Drive

City

Louisville

State

KY

Zip Code

40207

FEC ID number of contributing
federal political committee.

C

Name of Employer
LHI Lighting

Occupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 6 / 2 0 0 9

Transaction ID: SA11AI.10020

Amount of Each Receipt this Period

10.00

Individual Contribution

B.

Full Name (Last, First, Middle Initial)

Ronald Catron

Mailing Address 312 McArthur Drive

City

Louisville

State

KY

Zip Code

40207

FEC ID number of contributing
federal political committee.

C

Name of Employer
LHI Lighting

Occupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 9

Transaction ID: SA11AI.10021

Amount of Each Receipt this Period

10.00

Individual Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Ron Crimm

Mailing Address O.O. Box 43244

City

Middletown

State

KY

Zip Code

40253

FEC ID number of contributing
federal political committee.

C

Name of Employer
Thorobred Associates

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.9807

Amount of Each Receipt this Period

100.00

Personal Contribution

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 11 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Ron Crimm

Mailing Address O.O. Box 43244

City

Middletown

State

KY

Zip Code

40253

FEC ID number of contributing
federal political committee.

C

Name of Employer
Thorobred Associates

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1140.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 0 9

Transaction ID: SA11AI.9860

Amount of Each Receipt this Period

40.00

Individual Contribution

B.

Full Name (Last, First, Middle Initial)

Dr. Bob M. DeWeese

Mailing Address 6206 Glenn Hill Road

City

Louisville

State

KY

Zip Code

40222

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired surgeon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 1 / 2 0 0 9

Transaction ID: SA11AI.9821

Amount of Each Receipt this Period

100.00

Personal Contribution

C.

Full Name (Last, First, Middle Initial)

Kenneth Fleming

Mailing Address 2000 Camargo Road

City

Louisville

State

KY

Zip Code

40207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Louisville

Occupation

Metro Council

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 5 / 2 0 0 9

Transaction ID: SA11AI.9832

Amount of Each Receipt this Period

25.00

Individual Contribution

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Stan R. Franczek

Mailing Address 1213 Garden Creek Road

City

Louisville

State

KY

Zip Code

40223

FEC ID number of contributing
federal political committee.

C

Name of Employer
Capstone Realty

Occupation

Owner/Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.9848

Amount of Each Receipt this Period

1000.00

Individual Contribution

B.

Full Name (Last, First, Middle Initial)

Jean W. Frazier

Mailing Address 4810 Cherry Valley

City

Prospect

State

KY

Zip Code

40059

FEC ID number of contributing
federal political committee.

C

Name of Employer
HFFH, Inc.

Occupation

Real Estate Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 9

Transaction ID: SA11AI.9884

Amount of Each Receipt this Period

500.00

Individual Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Owsley B. Frazier

Mailing Address 5224 Avish Lane

City

Louisville

State

KY

Zip Code

40027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.9855

Amount of Each Receipt this Period

1000.00

Individual Contribution

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 48

(check only one)

| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Rick Heath

Mailing Address 3316 Springcrest Drive

City

Louisville

State

KY

Zip Code

40222

FEC ID number of contributing
federal political committee.

C

Name of Employer
Heath & Associates

Occupation

Manufacturer's Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | / | 3 | 1 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.9866

Amount of Each Receipt this Period

500.00

Individual Contribution

B.

Full Name (Last, First, Middle Initial)

Glenna Heimerdinger

Mailing Address 5407 Cranwood Lane

City

Louisville

State

KY

Zip Code

40291

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not ApplicableOccupation
Housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | / | 0 | 1 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.10023

Amount of Each Receipt this Period

10.00

Individual Contribution

C.

Full Name (Last, First, Middle Initial)

Glenna Heimerdinger

Mailing Address 5407 Cranwood Lane

City

Louisville

State

KY

Zip Code

40291

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not ApplicableOccupation
Housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 | / | 0 | 1 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.10024

Amount of Each Receipt this Period

10.00

Individual Contribution

SUBTOTAL of Receipts This Page (optional)

520.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Glenna Heimerdinger

Mailing Address 5407 Cranwood Lane

City

Louisville

State

KY

Zip Code

40291

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not Applicable

Occupation
Housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 1 / 2 0 0 9

Transaction ID: SA11AI.10025

Amount of Each Receipt this Period

10.00

Individual Contribution

B.

Full Name (Last, First, Middle Initial)

Glenna Heimerdinger

Mailing Address 5407 Cranwood Lane

City

Louisville

State

KY

Zip Code

40291

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not Applicable

Occupation
Housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 0 9

Transaction ID: SA11AI.10026

Amount of Each Receipt this Period

10.00

Individual Contribution

C.

Full Name (Last, First, Middle Initial)

Glenna Heimerdinger

Mailing Address 5407 Cranwood Lane

City

Louisville

State

KY

Zip Code

40291

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not Applicable

Occupation
Housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 9

Transaction ID: SA11AI.10027

Amount of Each Receipt this Period

10.00

Individual Contribution

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Glenna Heimerdinger

Mailing Address 5407 Cranwood Lane

City

Louisville

State

KY

Zip Code

40291

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not ApplicableOccupation
Housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 1 / 2 0 0 9

Transaction ID: SA11AI.10028

Amount of Each Receipt this Period

10.00

Individual Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Daniel A. Huneke

Mailing Address 6302 Wolf Pen Branch Road

City

Prospect

State

KY

Zip Code

40059

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dancor Inc.Occupation
Real Estate Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.10001

Amount of Each Receipt this Period

20.00

Individual Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Daniel A. Huneke

Mailing Address 6302 Wolf Pen Branch Road

City

Prospect

State

KY

Zip Code

40059

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dancor Inc.Occupation
Real Estate Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.10002

Amount of Each Receipt this Period

20.00

Individual Contribution

SUBTOTAL of Receipts This Page (optional)

50.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 48

(check only one)

| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Daniel A. Huneke

Mailing Address 6302 Wolf Pen Branch Road

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Prospect | KY | 40059 |

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dancor Inc.Occupation
Real Estate Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | / | 1 | 6 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.10003

Amount of Each Receipt this Period

20.00

Individual Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Daniel A. Huneke

Mailing Address 6302 Wolf Pen Branch Road

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Prospect | KY | 40059 |

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dancor Inc.Occupation
Real Estate Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | / | 1 | 6 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.10005

Amount of Each Receipt this Period

20.00

Individual Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Daniel A. Huneke

Mailing Address 6302 Wolf Pen Branch Road

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Prospect | KY | 40059 |

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dancor Inc.Occupation
Real Estate Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 1 | 6 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.10006

Amount of Each Receipt this Period

20.00

Individual Contribution

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Daniel A. Huneke

Mailing Address 6302 Wolf Pen Branch Road

City State Zip Code
Prospect KY 40059

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dancor Inc.

Occupation
Real Estate Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.10007

Amount of Each Receipt this Period

20.00

Individual Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Wade Hurt

Mailing Address 612 Kathleen Avenue

City State Zip Code
Louisville KY 40215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coldwell Banker

Occupation
Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1595.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 1 / 2 0 0 9

Transaction ID: SA11AI.9988

Amount of Each Receipt this Period

470.00

In-kind - Parking

C.

Full Name (Last, First, Middle Initial)

Mr. Wade Hurt

Mailing Address 612 Kathleen Avenue

City State Zip Code
Louisville KY 40215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coldwell Banker

Occupation
Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2095.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.9991

Amount of Each Receipt this Period

500.00

Individual Contribution

SUBTOTAL of Receipts This Page (optional)

990.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Wade Hurt

Mailing Address 612 Kathleen Avenue

City

Louisville

State

KY

Zip Code

40215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coldwell BankerOccupation
Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2124.51

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.9978

Amount of Each Receipt this Period

29.51

In-kind - picnic supplies

B.

Full Name (Last, First, Middle Initial)

Mr. Wade Hurt

Mailing Address 612 Kathleen Avenue

City

Louisville

State

KY

Zip Code

40215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coldwell BankerOccupation
Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2165.87

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.9980

Amount of Each Receipt this Period

41.36

In-kind - picnic supplies

C.

Full Name (Last, First, Middle Initial)

Mr. Wade Hurt

Mailing Address 612 Kathleen Avenue

City

Louisville

State

KY

Zip Code

40215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coldwell BankerOccupation
Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2332.01

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.9982

Amount of Each Receipt this Period

166.14

In-Kind - Picnic Supplies

SUBTOTAL of Receipts This Page (optional)

237.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Wade Hurt

Mailing Address 612 Kathleen Avenue

City

Louisville

State

KY

Zip Code

40215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coldwell Banker

Occupation
Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2384.89

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.9976

Amount of Each Receipt this Period

52.88

In-kind - Food & Drinks

B.

Full Name (Last, First, Middle Initial)

Mr. Wade Hurt

Mailing Address 612 Kathleen Avenue

City

Louisville

State

KY

Zip Code

40215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coldwell Banker

Occupation
Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2424.89

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 9

Transaction ID: SA11AI.9983

Amount of Each Receipt this Period

40.00

In-kind - Router

C.

Full Name (Last, First, Middle Initial)

Mr. Wade Hurt

Mailing Address 612 Kathleen Avenue

City

Louisville

State

KY

Zip Code

40215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coldwell Banker

Occupation
Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2512.89

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 9 / 2 0 0 9

Transaction ID: SA11AI.9963

Amount of Each Receipt this Period

88.00

In-kind - St. Fair Volunteer Tickets

SUBTOTAL of Receipts This Page (optional)

180.88

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Wade Hurt

Mailing Address 612 Kathleen Avenue

City

Louisville

State

KY

Zip Code

40215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coldwell Banker

Occupation
Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2597.09

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 9 / 2 0 0 9

Transaction ID: SA11AI.9974

Amount of Each Receipt this Period

84.20

In-kind - dolly

B.

Full Name (Last, First, Middle Initial)

Mr. Wade Hurt

Mailing Address 612 Kathleen Avenue

City

Louisville

State

KY

Zip Code

40215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coldwell Banker

Occupation
Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2685.09

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.9965

Amount of Each Receipt this Period

88.00

In-kind - St. Fair Volunteer Tickets

C.

Full Name (Last, First, Middle Initial)

Mr. Wade Hurt

Mailing Address 612 Kathleen Avenue

City

Louisville

State

KY

Zip Code

40215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coldwell Banker

Occupation
Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2729.09

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.9967

Amount of Each Receipt this Period

44.00

In-kind - St. Fair Volunteer Tickets

SUBTOTAL of Receipts This Page (optional)

216.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Wade Hurt

Mailing Address 612 Kathleen Avenue

City

Louisville

State

KY

Zip Code

40215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coldwell Banker

Occupation
Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2773.09

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 2 / 2 0 0 9

Transaction ID: SA11AI.9970

Amount of Each Receipt this Period

44.00

In-kind - St. Fair Volun-
teer Tickets

B.

Full Name (Last, First, Middle Initial)

Mr. Wade Hurt

Mailing Address 612 Kathleen Avenue

City

Louisville

State

KY

Zip Code

40215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coldwell Banker

Occupation
Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2795.09

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.9972

Amount of Each Receipt this Period

22.00

In-kind - St. Fair Volun-
teer Tickets

C.

Full Name (Last, First, Middle Initial)

Mr. Wade Hurt

Mailing Address 612 Kathleen Avenue

City

Louisville

State

KY

Zip Code

40215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coldwell Banker

Occupation
Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2885.68

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.9985

Amount of Each Receipt this Period

90.59

In-kind - Tables

SUBTOTAL of Receipts This Page (optional)

156.59

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Wade Hurt

Mailing Address 612 Kathleen Avenue

City

Louisville

State

KY

Zip Code

40215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coldwell Banker

Occupation
Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4166.68

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.9959

Amount of Each Receipt this Period

1281.00

In-kind - T-Shirts

B.

Full Name (Last, First, Middle Initial)

Mr. Wade Hurt

Mailing Address 612 Kathleen Avenue

City

Louisville

State

KY

Zip Code

40215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coldwell Banker

Occupation
Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4266.68

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.9961

Amount of Each Receipt this Period

100.00

In-kind - banner

C.

Full Name (Last, First, Middle Initial)

Corey A. Koellner

Mailing Address 5603 Southland Blvd.

City

Louisville

State

KY

Zip Code

40214

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ernst & Young

Occupation
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.10008

Amount of Each Receipt this Period

10.00

Individual Contribution

SUBTOTAL of Receipts This Page (optional)

1391.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Corey A. Koellner

Mailing Address 5603 Southland Blvd.

City

Louisville

State

KY

Zip Code

40214

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ernst & Young

Occupation
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.10009

Amount of Each Receipt this Period

10.00

Individual Contribution

B.

Full Name (Last, First, Middle Initial)

Corey A. Koellner

Mailing Address 5603 Southland Blvd.

City

Louisville

State

KY

Zip Code

40214

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ernst & Young

Occupation
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.10010

Amount of Each Receipt this Period

10.00

Individual Contribution

C.

Full Name (Last, First, Middle Initial)

Corey A. Koellner

Mailing Address 5603 Southland Blvd.

City

Louisville

State

KY

Zip Code

40214

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ernst & Young

Occupation
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.10012

Amount of Each Receipt this Period

10.00

Individual Contribution

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Corey A. Koellner

Mailing Address 5603 Southland Blvd.

City

Louisville

State

KY

Zip Code

40214

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ernst & Young

Occupation
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.10013

Amount of Each Receipt this Period

10.00

Individual Contribution

B.

Full Name (Last, First, Middle Initial)

Corey A. Koellner

Mailing Address 5603 Southland Blvd.

City

Louisville

State

KY

Zip Code

40214

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ernst & Young

Occupation
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.10014

Amount of Each Receipt this Period

10.00

Individual Contribution

C.

Full Name (Last, First, Middle Initial)

Corey A. Koellner

Mailing Address 5603 Southland Blvd.

City

Louisville

State

KY

Zip Code

40214

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ernst & Young

Occupation
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.10015

Amount of Each Receipt this Period

10.00

Individual Contribution

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Baylor, Jr. Landrum

Mailing Address 516 Rolling Lane

City

Louisville

State

KY

Zip Code

40207

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: SA11AI.9868

Amount of Each Receipt this Period

500.00

Individual Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. John M. Lawlor

Mailing Address 1270 Springdale Dr.

City

Louisville

State

KY

Zip Code

40213

FEC ID number of contributing
federal political committee.

C

Name of Employer
UPS

Occupation

Cargo handling

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.9811

Amount of Each Receipt this Period

25.00

Personal Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. James B. Leshner

Mailing Address 117 St. Matthews Avenue

City

Louisville

State

KY

Zip Code

40207

FEC ID number of contributing
federal political committee.

C

Name of Employer
self-employed

Occupation

private investigator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.9867

Amount of Each Receipt this Period

500.00

Individual Contribution

SUBTOTAL of Receipts This Page (optional)

1025.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. John McCarthy, Esq.

Mailing Address 413 Jarvis Lane

City

Louisville

State

KY

Zip Code

40207

FEC ID number of contributing
federal political committee.

C

Name of Employer
McCarthy Strategic Solu-
tions

Occupation

Government Relations Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 2 / 2 0 0 9

Transaction ID: SA11AI.9852

Amount of Each Receipt this Period

1000.00

Individual Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Jerry T. Miller

Mailing Address 17200 Ash Hill Dr.

City

Louisville

State

KY

Zip Code

40245

FEC ID number of contributing
federal political committee.

C

Name of Employer
Humana, Inc.

Occupation

Finance Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.9805

Amount of Each Receipt this Period

100.00

Personal Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Jerry T. Miller

Mailing Address 17200 Ash Hill Dr.

City

Louisville

State

KY

Zip Code

40245

FEC ID number of contributing
federal political committee.

C

Name of Employer
Humana, Inc.

Occupation

Finance Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 9 / 2 0 0 9

Transaction ID: SA11AI.9851

Amount of Each Receipt this Period

1000.00

Individual Contribution

SUBTOTAL of Receipts This Page (optional)

2100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Brian W O'Rourke

Mailing Address 6303 Dillard Court

City

Prospect

State

KY

Zip Code

40059

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 9

Transaction ID: SA11AI.9871

Amount of Each Receipt this Period

100.00

Individual Contribution

B.

Full Name (Last, First, Middle Initial)

Scott W. Reed

Mailing Address 1002 S. 12th St.

City

Louisville

State

KY

Zip Code

40210

FEC ID number of contributing
federal political committee.

C

Name of Employer
VG Reed & Sons

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.9839

Amount of Each Receipt this Period

250.00

Individual Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Walter S. Reichert

Mailing Address 5908 Santa Rosa Dr.

City

Louisville

State

KY

Zip Code

40219

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1030.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.9818

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Walter S. Reichert

Mailing Address 5908 Santa Rosa Dr.

City

Louisville

State

KY

Zip Code

40219

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1130.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.9881

Amount of Each Receipt this Period

100.00

Individual Contribution

B.

Full Name (Last, First, Middle Initial)

Joseph M. Ridge

Mailing Address 819 Foxwood Ave.

City

Louisville

State

KY

Zip Code

40223

FEC ID number of contributing
federal political committee.

C

Name of Employer
Doctor Remodel, LLC

Occupation
Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.9893

Amount of Each Receipt this Period

300.00

Individual Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. George Sonnier

Mailing Address 6410 Lime Ridge Place

City

Louisville

State

KY

Zip Code

40222

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 2 / 2 0 0 9

Transaction ID: SA11AI.9856

Amount of Each Receipt this Period

250.00

Individual Contribution

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. James F. Steinfeld

Mailing Address 7113 Wood Briar Rd.

City

Louisville

State

KY

Zip Code

40241

FEC ID number of contributing
federal political committee.

C

Name of Employer
Steinfeld, LLC

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 9

Transaction ID: SA11AI.9885

Amount of Each Receipt this Period

250.00

Individual Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. William D. Tafel

Mailing Address 25 Brownsboro Hill Rd.

City

Louisville

State

KY

Zip Code

40207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tafel Electric Company

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.9853

Amount of Each Receipt this Period

500.00

Individual Contribution

C.

Full Name (Last, First, Middle Initial)

Unknown Unknown

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1277.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.10029

Amount of Each Receipt this Period

1277.00

Individual Contribution

SUBTOTAL of Receipts This Page (optional)

2027.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Stephen Williams

Mailing Address 1017 Essex Court

City

Goshen

State

KY

Zip Code

40026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Norton HealthcareOccupation
CEO

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 | | 0 | 5 | | 2 | 0 | 9 | |

Transaction ID: SA11AI.9829

Amount of Each Receipt this Period

250.00

Individual Contribution

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

16993.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Friends to Elect Ernie Harris

Mailing Address P.O. Box 1073

City

Crestwood

State

KY

Zip Code

40014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 1 / 2 0 0 9

Transaction ID: SA11C.9808

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Kramer for Metro Council

Mailing Address 2915 Winterhaven Road

City

Louisville

State

KY

Zip Code

40220

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 2 / 2 0 0 9

Transaction ID: SA11C.9813

Amount of Each Receipt this Period

75.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Kramer for Metro Council

Mailing Address 2915 Winterhaven Road

City

Louisville

State

KY

Zip Code

40220

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 2 / 2 0 0 9

Transaction ID: SA11C.9823

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

425.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 48

(check only one)

| | | | |
|------------------------------|------------------------------|---|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17 | | | |

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Rand Paul for U.S. Senate Exploratory Committee

Mailing Address 200 Lakeside Way

City

Bowling Green

State

KY

Zip Code

42103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 0 / 2 0 0 9

Transaction ID: SA11C.9809

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

925.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 48

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

IKON Office Solutions

Mailing Address 810 Gears Road

City

Houston

State

TX

Zip Code

77067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

38.62

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 4 / 2 0 0 9

Transaction ID: SA16.9859

Amount of Each Receipt this Period

38.62

Refund

SUBTOTAL of Receipts This Page (optional)

38.62

TOTAL This Period (last page this line number only)

38.62

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 34 / 48

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|-----|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) FBM, Inc. | Transaction ID: SB21B.9915 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 410 W. Chestnut Street | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | | 0 | 5 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 8 | | 0 | 5 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Louisville State KY Zip Code 40241 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Rent | <table border="1"> <tr> <td>1</td><td>0</td><td>1</td><td>6</td><td>.</td><td>4</td><td>6</td> </tr> </table> | 1 | 0 | 1 | 6 | . | 4 | 6 | | | | | | | | | | | | | |
| 1 | 0 | 1 | 6 | . | 4 | 6 | | | | | | | | | | | | | | | |
| Candidate Name | <table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type | 001 | | | | | | | | | | | | | | | | | | | |
| 001 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) FBM, Inc. | Transaction ID: SB21B.9926 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 410 W. Chestnut Street | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 0 | 3 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 9 | | 0 | 3 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Louisville State KY Zip Code 40241 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Rent | <table border="1"> <tr> <td>1</td><td>0</td><td>1</td><td>6</td><td>.</td><td>4</td><td>6</td> </tr> </table> | 1 | 0 | 1 | 6 | . | 4 | 6 | | | | | | | | | | | | | |
| 1 | 0 | 1 | 6 | . | 4 | 6 | | | | | | | | | | | | | | | |
| Candidate Name | <table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type | 001 | | | | | | | | | | | | | | | | | | | |
| 001 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) FBM, Inc. | Transaction ID: SB21B.9936 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 410 W. Chestnut Street | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 3 | 0 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 9 | | 3 | 0 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Louisville State KY Zip Code 40241 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Rent | <table border="1"> <tr> <td>1</td><td>0</td><td>1</td><td>6</td><td>.</td><td>4</td><td>6</td> </tr> </table> | 1 | 0 | 1 | 6 | . | 4 | 6 | | | | | | | | | | | | | |
| 1 | 0 | 1 | 6 | . | 4 | 6 | | | | | | | | | | | | | | | |
| Candidate Name | <table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type | 001 | | | | | | | | | | | | | | | | | | | |
| 001 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

3049.38

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 35 / 48

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

| | |
|--|---|
| A. Full Name (Last, First, Middle Initial) FBM, Inc. | Transaction ID: SB21B.9941 Date of Disbursement |
| Mailing Address 410 W. Chestnut Street | <div> <div>10</div> <div>29</div> <div>2009</div> </div> |
| City Louisville State KY Zip Code 40241 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Rent | <div>1016.46</div> |
| Candidate Name | <div>001</div> Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) FBM, Inc. | Transaction ID: SB21B.9956 Date of Disbursement |
| Mailing Address 410 W. Chestnut Street | <div> <div>12</div> <div>04</div> <div>2009</div> </div> |
| City Louisville State KY Zip Code 40241 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Rent | <div>1016.46</div> |
| Candidate Name | <div>001</div> Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) Forms Management, Inc. | Transaction ID: SB21B.9950 Date of Disbursement |
| Mailing Address 832 S. Sixth St. | <div> <div>12</div> <div>04</div> <div>2009</div> </div> |
| City Louisville State KY Zip Code 40203 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Labels | <div>100.00</div> |
| Candidate Name | <div>001</div> Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional)

2132.92

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 36 / 48

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

| | |
|--|---|
| A. Full Name (Last, First, Middle Initial) Mr. Wade Hurt | Transaction ID: SB21B.9989 Date of Disbursement |
| Mailing Address 612 Kathleen Avenue | <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 1 / 2 0 0 9</div> </div> |
| City Louisville State KY Zip Code 40215 | Amount of Each Disbursement this Period |
| Purpose of Disbursement In-kind - Parking | <div>470.00</div> |
| Candidate Name | <div>Category/Type</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) Mr. Wade Hurt | Transaction ID: SB21B.9979 Date of Disbursement |
| Mailing Address 612 Kathleen Avenue | <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 9 / 2 0 0 9</div> </div> |
| City Louisville State KY Zip Code 40215 | Amount of Each Disbursement this Period |
| Purpose of Disbursement In-kind - picnic supplies | <div>29.51</div> |
| Candidate Name | <div>Category/Type</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) Mr. Wade Hurt | Transaction ID: SB21B.9981 Date of Disbursement |
| Mailing Address 612 Kathleen Avenue | <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 0 / 2 0 0 9</div> </div> |
| City Louisville State KY Zip Code 40215 | Amount of Each Disbursement this Period |
| Purpose of Disbursement In-kind - picnic supplies | <div>41.36</div> |
| Candidate Name | <div>Category/Type</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional)

540.87

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 37 / 48

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Mr. Wade Hurt | Transaction ID: SB21B.9908 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 612 Kathleen Avenue | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 1 | 4 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 7 | | 1 | 4 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Louisville State KY Zip Code 40215 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Office Management Candidate Name | <table border="1"> <tr> <td colspan="10">1750.00</td> </tr> </table> | 1750.00 | | | | | | | | | | | | | | | | | | | |
| 1750.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Mr. Wade Hurt | Transaction ID: SB21B.9914 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 612 Kathleen Avenue | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 3 | 1 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 7 | | 3 | 1 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Louisville State KY Zip Code 40215 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Office Management Candidate Name | <table border="1"> <tr> <td colspan="10">1750.00</td> </tr> </table> | 1750.00 | | | | | | | | | | | | | | | | | | | |
| 1750.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Mr. Wade Hurt | Transaction ID: SB21B.9977 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 612 Kathleen Avenue | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | | 0 | 4 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 8 | | 0 | 4 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Louisville State KY Zip Code 40215 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement In-kind - Food & Drinks Candidate Name | <table border="1"> <tr> <td colspan="10">52.88</td> </tr> </table> | 52.88 | | | | | | | | | | | | | | | | | | | |
| 52.88 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

3552.88

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 38 / 48

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Wade Hurt

Mailing Address 612 Kathleen Avenue

City Louisville State KY Zip Code 40215

Purpose of Disbursement

In-kind - Router

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.9984

Date of Disbursement

08 / 15 / 2009

Amount of Each Disbursement this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Mr. Wade Hurt

Mailing Address 612 Kathleen Avenue

City Louisville State KY Zip Code 40215

Purpose of Disbursement

Office Management

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.9924

Date of Disbursement

08 / 18 / 2009

Amount of Each Disbursement this Period

1750.00

C.

Full Name (Last, First, Middle Initial)

Mr. Wade Hurt

Mailing Address 612 Kathleen Avenue

City Louisville State KY Zip Code 40215

Purpose of Disbursement

In-kind - St. Fair Volunteer Tickets

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.9964

Date of Disbursement

08 / 19 / 2009

Amount of Each Disbursement this Period

88.00

SUBTOTAL of Disbursements This Page (optional)

1878.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

| | |
|--|---|
| A. Full Name (Last, First, Middle Initial) Mr. Wade Hurt | Transaction ID: SB21B.9975 Date of Disbursement |
| Mailing Address 612 Kathleen Avenue | <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 9 / 2 0 0 9</div> </div> |
| City Louisville State KY Zip Code 40215 | Amount of Each Disbursement this Period |
| Purpose of Disbursement In-kind - dolly | <div>84.20</div> |
| Candidate Name | <div>Category/Type</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) Mr. Wade Hurt | Transaction ID: SB21B.9966 Date of Disbursement |
| Mailing Address 612 Kathleen Avenue | <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 1 / 2 0 0 9</div> </div> |
| City Louisville State KY Zip Code 40215 | Amount of Each Disbursement this Period |
| Purpose of Disbursement In-kind - St. Fair Volunteer Tickets | <div>88.00</div> |
| Candidate Name | <div>Category/Type</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) Mr. Wade Hurt | Transaction ID: SB21B.9968 Date of Disbursement |
| Mailing Address 612 Kathleen Avenue | <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 1 / 2 0 0 9</div> </div> |
| City Louisville State KY Zip Code 40215 | Amount of Each Disbursement this Period |
| Purpose of Disbursement In-kind - St. Fair Volunteer Tickets | <div>44.00</div> |
| Candidate Name | <div>Category/Type</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional)

216.20

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Wade Hurt

Mailing Address 612 Kathleen Avenue

City Louisville State KY Zip Code 40215

Purpose of Disbursement
In-kind - St. Fair Volunteer Tickets

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.9971

Date of Disbursement

08 / 22 / 2009

Amount of Each Disbursement this Period

44.00

B.

Full Name (Last, First, Middle Initial)

Mr. Wade Hurt

Mailing Address 612 Kathleen Avenue

City Louisville State KY Zip Code 40215

Purpose of Disbursement
In-kind - St. Fair Volunteer Tickets

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.9973

Date of Disbursement

08 / 24 / 2009

Amount of Each Disbursement this Period

22.00

C.

Full Name (Last, First, Middle Initial)

Mr. Wade Hurt

Mailing Address 612 Kathleen Avenue

City Louisville State KY Zip Code 40215

Purpose of Disbursement
Office Management

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.9925

Date of Disbursement

09 / 03 / 2009

Amount of Each Disbursement this Period

1750.00

SUBTOTAL of Disbursements This Page (optional)

1816.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

| | |
|--|---|
| A. Full Name (Last, First, Middle Initial) Mr. Wade Hurt | Transaction ID: SB21B.9930 Date of Disbursement |
| Mailing Address 612 Kathleen Avenue | <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 6 / 2 0 0 9</div> </div> |
| City Louisville State KY Zip Code 40215 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Office Management Candidate Name | <div> <div>1750.00</div> <div>001</div> <div>Category/Type</div> </div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) Mr. Wade Hurt | Transaction ID: SB21B.9987 Date of Disbursement |
| Mailing Address 612 Kathleen Avenue | <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 6 / 2 0 0 9</div> </div> |
| City Louisville State KY Zip Code 40215 | Amount of Each Disbursement this Period |
| Purpose of Disbursement In-kind - Tables Candidate Name | <div> <div>90.59</div> <div></div> <div>Category/Type</div> </div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) Mr. Wade Hurt | Transaction ID: SB21B.9960 Date of Disbursement |
| Mailing Address 612 Kathleen Avenue | <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 8 / 2 0 0 9</div> </div> |
| City Louisville State KY Zip Code 40215 | Amount of Each Disbursement this Period |
| Purpose of Disbursement In-kind - T-Shirts Candidate Name | <div> <div>1281.00</div> <div></div> <div>Category/Type</div> </div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional)

3121.59

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Mr. Wade Hurt | Transaction ID: SB21B.9962 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 612 Kathleen Avenue | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 1 | 8 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 9 | | 1 | 8 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Louisville State KY Zip Code 40215 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement In-kind - banner Candidate Name | <table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table> | 100.00 | | | | | | | | | | | | | | | | | | | |
| 100.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Mr. Wade Hurt | Transaction ID: SB21B.9942 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 612 Kathleen Avenue | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 | | 2 | 9 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 1 | 0 | | 2 | 9 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Louisville State KY Zip Code 40215 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Office Management Candidate Name | <table border="1"> <tr> <td colspan="10">1750.00</td> </tr> </table> | 1750.00 | | | | | | | | | | | | | | | | | | | |
| 1750.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Mr. Wade Hurt | Transaction ID: SB21B.9948 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 612 Kathleen Avenue | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 1 | | 1 | 3 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 1 | 1 | | 1 | 3 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Louisville State KY Zip Code 40215 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Office Management Candidate Name | <table border="1"> <tr> <td colspan="10">1750.00</td> </tr> </table> | 1750.00 | | | | | | | | | | | | | | | | | | | |
| 1750.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

3600.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

| | | |
|-----------|---|---|
| A. | <p>Full Name (Last, First, Middle Initial) Mr. Wade Hurt</p> <p>Mailing Address 612 Kathleen Avenue</p> <p>City Louisville State KY Zip Code 40215</p> <p>Purpose of Disbursement Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB21B.9954</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="88.84"/></p> |
| B. | <p>Full Name (Last, First, Middle Initial) Insight Communications</p> <p>Mailing Address 4701 Commerce Crossings Dr.</p> <p>City Louisville State KY Zip Code 40229</p> <p>Purpose of Disbursement Phone and Internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB21B.9917</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="130.96"/></p> |
| C. | <p>Full Name (Last, First, Middle Initial) Insight Communications</p> <p>Mailing Address 4701 Commerce Crossings Dr.</p> <p>City Louisville State KY Zip Code 40229</p> <p>Purpose of Disbursement Phone and Internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB21B.9927</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="130.96"/></p> |

SUBTOTAL of Disbursements This Page (optional)

350.76

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|--------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Insight Communications | Transaction ID: SB21B.9939 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 4701 Commerce Crossings Dr. | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 | | 2 | 9 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 1 | 0 | | 2 | 9 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Louisville State KY Zip Code 40229 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Phone and Internet Candidate Name | <table border="1"> <tr> <td colspan="10">130.96</td> </tr> </table> | 130.96 | | | | | | | | | | | | | | | | | | | |
| 130.96 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Insight Communications | Transaction ID: SB21B.9944 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 4701 Commerce Crossings Dr. | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 1 | | 1 | 0 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 1 | 1 | | 1 | 0 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Louisville State KY Zip Code 40229 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Phone and Internet Candidate Name | <table border="1"> <tr> <td colspan="10">261.65</td> </tr> </table> | 261.65 | | | | | | | | | | | | | | | | | | | |
| 261.65 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Kentucky State Fair Board | Transaction ID: SB21B.9906 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address P.O. Box 37130 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 1 | 4 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 7 | | 1 | 4 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Louisville State KY Zip Code 40233 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement State Fair Booth Candidate Name | <table border="1"> <tr> <td colspan="10">425.00</td> </tr> </table> | 425.00 | | | | | | | | | | | | | | | | | | | |
| 425.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

817.61

TOTAL This Period (last page this line number only)

| | | | | | | | | | | | |
|---|-----|--|-----|--|-----|--|-----|--|----|--|-----|
| X | 21b | | 22 | | 23 | | 24 | | 25 | | 26 |
| | 27 | | 28a | | 28b | | 28c | | 29 | | 30b |

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

07 / 01 / 2009

592.95

State: District:

07 / 29 / 2009

2157.11

State: District:

942.22

State: District:

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 46 / 48

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Ms Ellen L. Reitmeyer

Transaction ID: SB21B.9943

Date of Disbursement

11 / 10 / 2009

Mailing Address 1122 Powerhouse Lane
Unit 204

City Louisville State KY Zip Code 40242

Amount of Each Disbursement this Period

973.51

Purpose of Disbursement
Reimbursement

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)

Ms Ellen L. Reitmeyer

Transaction ID: SB21B.9955

Date of Disbursement

12 / 04 / 2009

Mailing Address 1122 Powerhouse Lane
Unit 204

City Louisville State KY Zip Code 40242

Amount of Each Disbursement this Period

693.47

Purpose of Disbursement
Reimbursement

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)

Salem Radio

Transaction ID: SB21B.9904

Date of Disbursement

07 / 01 / 2009

Mailing Address 9960 Corporate Campus Dr.
Suite 3600

City Louisville State KY Zip Code 40223

Amount of Each Disbursement this Period

750.00

Purpose of Disbursement
JCRP Annual Picnic

Candidate Name

004
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

2416.98

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Southwest Festival

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Booth

Candidate Name

004

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Transaction ID: SB21B.9934

Date of Disbursement

MM / DD / YYYY
09 / 28 / 2009

Amount of Each Disbursement this Period

160.00

SUBTOTAL of Disbursements This Page (optional)

160.00

TOTAL This Period (last page this line number only)

27345.47

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

Nature of Debt (Purpose):

Deposits should be made
to non-fed acct

Mailing Address PO BOX 24843

| | | |
|------------|-------|----------|
| City | State | ZIP Code |
| LOUISVILLE | KY | 40224 |

Outstanding Balance Beginning This Period

23981.36

Transaction ID: SD10.9376

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

23981.36

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

Nature of Debt (Purpose):

Deposit tranfer to non-federal
account

Mailing Address PO BOX 24843

| | | |
|------------|-------|----------|
| City | State | ZIP Code |
| LOUISVILLE | KY | 40224 |

Outstanding Balance Beginning This Period

109.41

Transaction ID: SD10.9399

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

109.41

1) **SUBTOTALS** This Period This Page (optional).....

24090.77

2) **TOTALS** This Period (last page this line number only).....

24090.77

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

24090.77